

09/943,460

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>SP</i>		<i>10-28-01</i>
O.I.P.E. CLASSIFIER			<i>10-28-01</i>
FORMALITY REVIEW	<i>CV</i>	<i>923</i>	<i>10-28-01</i>
RESPONSE FORMALITY REVIEW	<i>AM</i>	<i>917</i>	<i>01-08-01</i>

10/5/503

INDEX OF CLAIMS

..... Rejected
..... Allowed
(Through numeral)..... Canceled
..... Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
Final Original	
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here